# L23000276194

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
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Certified Copies Certificates of Status
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FLORIDA CAPITAL COURIER SE	ERVICES, INC
2330 CLARE DRIVE	
TALLAHASSEE, FL 32309 (850) 524-5437	<b>\$</b>
(850) 524-6243	•
(020) 324-0243	
Please use funds from this account:	120210000160 : <u>\$150.00</u>
Authorization Signature Authorization	-fello-
Sarnia Consultants, LLC	
BUSINESS	DOC#
Certified Copy of Articles	
Certificate of Status	
NEW EILINGS	AMENDMENTS
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp	Amendment
Not for Profit	Resignation of R.A. or member
Officer/Director	Dissolution
Limited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
Other	Merger
_ CORP	_X_Conversion
LLLP	Amended and restated ArticlesStatement of Authority
	Statement of Authority
OTHER FILINGS	
	REGISTERATION/QUALIFICATIONS
<u>Trademark</u>	
Annual Report	Foreign filing
mt ata Ni	Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other
Country	

EXAMINIER'S INITIALS:\_\_\_\_

FLORIDA CAPITAL COURIER SERV	ICES, INC
2330 CLARE DRIVE	
TALLAHASSEE, FL 32309 (850) 524-5437	
(850) 524-6243	
(830) 324-0243	
Please use funds from this account: 1202	10000160 : <u>\$150.00</u>
Authorization Signature	there-
Sarnia Consultants, LLC	
BUSINESS	DOC#
Certified Copy of Articles Certificate of Status	
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OTHER FILINGS	
<u>R</u>	REGISTERATION/QUALIFICATIONS
<u>Trademark</u>	
Annual Report	Foreign filing
	Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other
Country	

EXAMINIER'S INITIALS:\_\_\_\_\_

June 6, 2023

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: SARINA CONSULTANTS, LLC

Ref. Number: W23000079507

We have received your document for SARINA CONSULTANTS, LLC. However, the document has not been filed and is being returned for the following:

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If you have any further questions concerning your document, please call (850 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 923A00012859

PH ALLIAMASSEE

KECEIVED

#### **COVER LETTER**

TO:	New Filing S Division of C				
SUBJ	IECT: SARNIA	CONSULTANTS, LLC			
		(Name of Re	sulting Florida Limit	ed Con	npany)
			_		nd fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corr	espondence concernin	g this matter to:		
RICH	ARD C. VAUGH	AN, ESQ.			
		(Contact Person)		•	
ELLIS	LAW GROUP,	P.L.			
		(Firm/Company)		-	
4755	TECHNOLOGY	WAY, SUITE 205			
	<del>-,-,</del> -	(Address)		-	
BOCA	RATON, FLOR	IDA 33431			
	((	City, State and Zip Code)		-	
richar	d@Ellis-Law.con	n			
E-r	nail Address: (to b	e used for future annual re	port notifications)	•	
For fi	ırther informati	on concerning this ma	tter, please call:		
Richa	rd C. Vaughan, E	Esq.	at ( <sup>561</sup>	910-	7500
	(Name of Conta	act Person)		(Day	ytime Telephone Number)
		or the following amou a bank located in the	•	roces:	sed by this office must be payable in US
(\$25 fc & \$12:	i0.00 Filing Fees or Conversion 5 for Articles anization)		□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632	ection orporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## **Articles of Conversion**

For

### "Other Business Entity"

nto

### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnersh	nip, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Rhode Island (Enter state, or if a non-U.S	. entity, the name of the country)
July 16, 2019	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attac	ched Articles of Organization:
SARNIA CONSULTANTS, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to date of receipt or filed date nor most the date this document is filed by the Florida Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	re than 90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable	****
5. The plan of conversion has occur approved in accordance with an approacte	statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members have which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F	ng appraisal rights the amount to
6. The "Converted or Other Business Entity" has agreed to pay any members having	ng appraisal rights the amount to
6. The "Converted or Other Business Entity" has agreed to pay any members having	ng appraisal rights the amount to E.S.

Signed this Handay of June	20_7_3
Signature of Authorized Representative of Lips	ised Lability Company:
Signature of Authorized Representative: Printed Name: Richard C. Vaughan, Esq.	Title: Authorized Representative
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: // multiplum	
Printed Name Richard C. Vaughar, Esq.	Title: Authorized Representative
Signature:	
Printed Name:	Title:
Signature:Printed Name:	m'al.
Printed Name:	1 itle:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	o.m
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	any is:	
SARNIA CONSULTANTS, LLC		
(Must contain the words "Limited	Liability Company, "L.L.C.," or "L.LC.")	
ARTICLE II - Address:		
The mailing address and street address of	f the principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
771 Jeffrey Street, Apt. 202	771 Jeffrey Street, Apt. 202	
Boca Raton, FL 33487	Boca Raton, FL 33487	
business entity with an active Florida registration.)  The name and the Florida street address of SETH E. ELLIS, ESQ.	of the registered agent are:	
	Name	
4755 TECHNOLOGY V	NAV SUUTE 205	
<del></del>	ss (P.O. Box NOT acceptable)	
BOCA RATON	FL. <sup>33431</sup>	
City	Zip	
registered agent and agree to act in this statutes relating to the proper and eof accept the obligations of my position Registered Agent	ated in this certificate, I hereby accept	the appointment as ith the provisions of al am familiar with and
		= (

#### ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	GILES LOUVET
- WOIX	771 Jeffery Street, Apt. 202
	Boca Raton, FL 33487
MGR	IAME MACOUE LOUNET
<u>IVIGR</u>	JANE McCUE-LOUVET
	771 Jeffery Street, Apt. 202 Boca Raton, FL 33487
	Buca Raturi, FL 33407
<del></del> -	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	<del></del>

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)